

DISTRICT TWO

OFFICE OF THE MEDICAL EXAMINER

1899 Eider Court • P. O. Box 14389 • Tallahassee, FL 32317 • Phone 850-942-7473 • Fax 850-219-7690

David T. Stewart, M.D., *Medical Examiner*
John P. Mahoney, M.D., *Associate*
Stephen L. Sgan, M.D., *Associate*
Lisa M. Flannagan, M.D., *Associate*
Anthony J. Clark, M.D., *Associate*

CASE NO.
14M-462

DECEASED
MAY, Myron DeShawn

STATE ATTORNEY
William N. Meggs

RACE	SEX	AGE
Black	Male	31

COUNTY DEATH OCCURRED
Leon

DATE OF DEATH
November 20, 2014

INVESTIGATING AGENCY
Tallahassee Police Department

DATE & TIME OF AUTOPSY
November 21, 2014 at 9:00 a.m.

IN ATTENDANCE
See below

PATHOLOGIST
Lisa M. Flannagan, M.D.

Investigators Papy and Cherry; Forensic Specialists Kornegay, Williams and James

FINAL PATHOLOGIC DIAGNOSES:

- I. Gunshot wounds of chest, abdomen and back (13).
 - A. Injuries of abdominal aorta, spleen, left hemidiaphragm, left lung, stomach, pancreas, left kidney, liver and right scapula.
 - B. Fractures of multiple ribs.
 - C. Hemothoraces (right chest 250 ml, left chest 450 ml).
 - D. Hemoperitoneum (100 ml).
- II. Gunshot wounds of buttocks (5) with soft tissue injuries.
- III. Gunshot wounds of legs (4) with soft tissue injuries.
- IV. Gunshot wounds of left arm (2) with fractures of left distal humerus.
- V. Postmortem blood positive for amphetamine (0.24 mg/L).

CAUSE OF DEATH: Multiple gunshot wounds (24 total).

EXTERNAL EXAMINATION:

The body is received in a black body bag that has been sealed with evidence tape and a zip tie. A Tallahassee Memorial HealthCare tag with the decedent's name is attached to the outside of the bag. The tag indicates that the body was placed in the morgue on 11/20/2014 at 5:10 a.m. The body is received wrapped in a white sheet and fully clothed. The body is lying prone with the head turned to his right. The hands have been cuffed behind the back. The handcuffs are removed by law enforcement and are retained in their custody. The body is clad in a blue long-sleeved shirt, a maroon knit pullover vest, faded blue jean pants with a brown belt, blue and gray sneakers, dark blue print socks and black bathing suit trunks. The shirt, vest and pants are blood-soaked along the front and there is blood on the sheet under the body. There are multiple defects in the clothing that correspond to the gunshot wounds described below. The clothing is photographed and turned over to law enforcement. The heel of the left shoe shows a perforating defect involving the bottom of the heel and the sole edge along the posteromedial heel. A small detached piece of the shoe sole from the defect is recovered from near the shoe and is secured as evidence. A pack of cigarettes is recovered from the left front shirt pocket. There is a wrist watch around the left wrist. Several fragments of projectiles are recovered from around the body. All of the fragments are photographed and turned over to law enforcement. The fragments include (1) a small jacketed piece of lead lying by the feet, (2) two small lead fragments on the left thigh, (3) a distorted large-caliber, jacketed projectile from near the right hip (with embedded blue fibers), (4) a mushroomed, large-caliber, jacketed projectile from the left side of the torso (between the shirt and vest), (5) a distorted jacketed projectile lying by the left shoulder and (6) a small fragment of a projectile jacket recovered from the soft tissues of the exit gunshot wound along the left medial elbow.

The body is that of a well-developed and well nourished male measuring 68 inches, weighing an estimated 150 pounds and appearing to be the reported age of 31 years. The body has not been embalmed and is well preserved. Rigor mortis is fully developed. Faint livor mortis is evident over of the anterior aspect of the body. The temperature of the body is cold. A minor injury of the forehead will be described below. The head hair consists of slight stubble along the back and sides of the head. There is balding on top. Facial hair consists of a short black goatee and slight stubble. The eyes are brown with clear corneas. The external ears and external auditory canals are unremarkable. The skeleton of the nose is intact. The teeth are natural and in a good state of dental repair. The lips and oral mucosa show no evidence of trauma. There are a few small dried cracks of the lower lip. The neck, shoulders and chest are symmetrical. Injuries of the chest, abdomen and back will be described below. The abdomen is flat. The external genitalia are those of a normal circumcised male. There are no palpable testicular masses. No perineal or anal lesions or injuries are identified. Injuries of the extremities will be described below. The lateral aspect of the right upper arm shows a keloid scar in the shape of the Greek letter sigma. The lateral aspect of the left upper arm shows a tattoo of "Phi Beta Sigma" and a crest.

68 inches
= 5 feet 8

EVIDENCE OF MEDICAL INTERVENTION:

medical intervention.

There is no evidence of

1x

EVIDENCE OF INJURY:**GUNSHOT WOUND #1 – LEFT POSTEROLATERAL CHEST:**

ENTRY WOUND: The left posterolateral chest shows an entry gunshot wound located 19 ½ inches below the top of the head and 1 ½ inches posterior to the left lateral midline. The wound is ¾ inch and round. There is a circumferential abrasion collar. No soot or stippling is identified.

EXIT WOUND: There is no exit wound.

WOUND TRACK: The wound track passes through the left posterolateral chest wall fracturing the 9th rib. There are injuries of the left hemidiaphragm and spleen. The wound track ends along the left lateral thoracic spine at T12. A mushroomed, jacketed projectile is recovered from the posterior spine at T12. The underlying dura and spinal cord are intact. There is hemorrhage along the wound track.

DIRECTION: The wound track passes from left to right, slightly downward and without significant front or back deviation.

GUNSHOT WOUND #2 – LEFT LATERAL LOWER CHEST:

ENTRY WOUND: The left lateral lower chest shows an entry gunshot wound 22 ½ inches below the top of the head. The wound is along the lateral midline and is ¾ inch. The wound is round with an abrasion collar. No soot or stippling is identified.

EXIT WOUND: There is no exit wound.

WOUND TRACK: The wound track passes through the lateral 9th rib and 9th intercostal space. There are injuries of the left hemidiaphragm, spleen, left kidney, stomach, tail of pancreas and the aorta at the level of T12. The wound track passes through the right lobe of the liver resulting in extensive tears of the parenchyma. The wound track exits the right lower lateral chest through the 7th intercostal space. There is a fracture of the superior edge of the right 8th rib. A mushroomed, jacketed projectile is recovered from the musculature of the right lateral chest wall. There is hemorrhage along the wound track.

DIRECTION: The wound track passes from left to right, slightly upward and slightly back to front.

GUNSHOT WOUND #3- LEFT LATERAL LOWER CHEST:

ENTRY WOUND: The left lateral lower chest shows an entry gunshot wound located 22 ¾ inches below the top of the head and ½ inch

A

anterior to the left lateral midline. The wound is $\frac{3}{8}$ inch and round with a $\frac{1}{8}$ to $\frac{1}{4}$ inch abrasion collar. No soot or stippling is identified.

EXIT WOUND:

There is no exit wound.

WOUND TRACK:

The wound track passes through the left lateral 9th rib and 9th intercostal space (in the same area as GSW #2). The wound track perforates the left hemidiaphragm and travels through the lower lobe of the left lung to exit the left posterior chest wall near the spine at the level of the 4th rib. The 4th rib is fractured near the spine. A mushroomed, jacketed, projectile is recovered from the soft tissues of the posterior lower neck. There is hemorrhage along the wound track.

DIRECTION:

left to right, upward and front to back.

The wound track passes from

GUNSHOT WOUND #4 – LEFT MID BACK:

ENTRY WOUND:

The left mid back shows an entry gunshot wound 19 $\frac{1}{2}$ inches below the top of the head and 1 inch to the left of the posterior midline. The wound is 1 $\frac{1}{4}$ x $\frac{3}{8}$ inch and curved with a roughly 1 to 7 o'clock orientation. No soot or stippling is identified.

EXIT WOUND:

There is no exit wound.

WOUND TRACK:

The wound track passes through the posterior left chest wall fracturing ribs 7 and 8. The wound track courses upward and to the left through the upper lobe of the left lung to strike the parietal surface of the lateral left 3rd rib. The rib is fractured and there is a small amount of hemorrhage in the overlying skeletal muscle. Hemorrhage is present along the wound track through the lung. A distorted, jacketed projectile is recovered from the omental fat of the left upper abdomen. [The projectile did not penetrate through the chest wall at the 3rd rib and stayed within the chest cavity. It then apparently was displaced through the traumatic defect of the left hemidiaphragm after getting caught in omental fat.]

DIRECTION:

right to left, slightly back to front and upward.

The wound track passes from

GUNSHOT WOUND #5 - LEFT ANTERIOR CHEST:

ENTRY WOUND:

The left anterior chest shows an entry gunshot wound located 17 $\frac{1}{2}$ inches below the top of the head and 4 $\frac{1}{2}$ inches to the left of the anterior midline. The wound is present along the inferior and lateral edge of the left areola. The wound is $\frac{1}{2}$ x 1 inch. There are transverse $\frac{1}{4}$ to $\frac{1}{2}$ inch superficial abrasions near the 3 to 6 o'clock wound margin. No soot or stippling is identified.

A

EXIT WOUND:

The left anteromedial chest shows a stellate $\frac{1}{2} \times \frac{3}{4}$ inch exit wound 15 $\frac{1}{2}$ inches below the top of the head and 1 inch to the left of the anterior midline.

WOUND TRACK:

The wound track passes through the soft tissues of the left anterior chest. There is no perforation of the anterior chest wall. No projectile fragments are recovered.

DIRECTION:

The wound track passes from left to right, upward and slightly back to front.

GUNSHOT WOUND #6 – LEFT LOWER BUTTOCK:

ENTRY WOUND:

The inferior aspect of the left buttock shows an entry wound that consists of two wounds along the inferior gluteal crease. The lower wound is 30 inches above the heel and 2 $\frac{3}{4}$ inch to the left of the posterior midline. The wound is $\frac{5}{8}$ inch with a $\frac{3}{8}$ inch abrasion along the 3 to 9 o'clock wound margin. The upper wound is 31 inches above the heel and 2 $\frac{1}{2}$ inches to the left of the posterior midline. The wound is $\frac{3}{4}$ inch with marginal abrasions. No soot or stippling is identified.

EXIT WOUND:

There is no exit wound.

WOUND TRACK:

The wound track passes through the soft tissues of the left buttock. A partially-flattened, jacketed projectile is recovered from just under the skin of the left lower back/upper pelvis. There is hemorrhage around the projectile.

DIRECTION:

The wound track passes upward, slightly left to right and slightly back to front.

GUNSHOT WOUND #7 – RIGHT LOWER BUTTOCK:

ENTRY WOUND:

The right lower buttock shows an entry gunshot wound 30 $\frac{1}{2}$ inches above the heel and 5 inches to the right of the posterior midline. The wound is $\frac{3}{4} \times \frac{1}{2}$ inch and shows a $\frac{3}{4}$ inch abrasion along the superior edge and a $\frac{1}{4}$ inch abrasion from the 5 to 11 o'clock margin. No soot or stippling is identified.

EXIT WOUND:

There is no exit wound.

WOUND TRACK:

The wound track passes through the soft tissues of the right buttock in an upward direction. A partially-flattened, jacketed projectile is recovered from the soft tissues of the right lower back/upper pelvis.

15

DIRECTION:
slightly left to right and slightly back to front.

The wound track passes upward,

GUNSHOT WOUND #8 – MID TO UPPER BACK:

The mid back shows a graze-type gunshot wound that consists of two separate elongated wounds. Each wound has a 5 to 11 o'clock orientation. No soot or stippling is identified. The lower wound is 3 x ½ inch and centered 20 inches below the top of the head. This wound is located to the right of the posterior midline. The upper wound is 2 ½ x ¾ inch and centered 16 ½ inches below the top of the head. This wound is to the left of the posterior midline. A distorted, jacketed projectile with blue fibers is partially embedded in the skin at the superior tip of the second part of the graze wound (11 o'clock tip). The projectile is labeled as being recovered from the upper middle back. There is no penetration of the chest cavities or spinal column. The wound track passes from right to left and upward.

GUNSHOT WOUND #9 – MID TO UPPER BACK:

The mid to upper back has a graze wound consisting of two separate injuries that have very similar configurations and orientations as those of GSW #8. Both components of graze wound #9 have a 5 to 11 o'clock orientation with the lower wound being to the right of the posterior midline and the upper wound being to the left of the posterior midline. The lower wound is 4 x 1 ½ inch and centered 18 ½ inch below the top of the head. The upper wound is 3 x ¾ inch and centered 15 inches below the top of the head. No projectile fragments are recovered. No soot or stippling is identified. There are no penetrating injuries of the chest cavities or spinal column. The wound track direction is right to left and upward.

GUNSHOT WOUND #10 – ANTEROMEDIAL RIGHT UPPER THIGH:

ENTRY WOUND: The anteromedial right thigh shows an entry gunshot wound located 28 inches above the heel and 4 ½ inches medial to the anterior midline of the right thigh. The wound is ¾ inch and round with an abrasion collar. No soot or stippling is identified.

EXIT WOUND: The posterolateral right thigh shows an exit wound located 29 inches above the heel and 8 inches to the right of the posterior midline. The wound is ¾ inch and round.

WOUND TRACK: The wound track passes through the soft tissues of the right thigh. No projectile fragments are recovered.

DIRECTION: The wound track passes from left to right, slightly upward and front to back.

GUNSHOT WOUND #11 – LATERAL RIGHT BACK NEAR AXILLA:

ENTRY WOUND:

There is an entry gunshot wound of the right lateral back near the posterior axilla. The wound is $6\frac{3}{4}$ inch below the top of the shoulder and $2\frac{3}{4}$ inch posterior to the right lateral midline. The wound is $\frac{5}{8} \times \frac{1}{2}$ inches and has a $\frac{1}{4}$ inch abrasion along the inferior wound edge. No soot or stippling is identified.

EXIT WOUND:

The right upper back shows an exit wound $9\frac{1}{4}$ inch below the top of the head, $1\frac{3}{4}$ inch to the right of the posterior midline and near the top of the shoulder. The wound is $\frac{3}{4} \times \frac{3}{8}$ inch and shows irregular tears of the wound edges.

WOUND TRACK:

The wound track passes through the soft tissues of the right upper back. There are extensive fractures of the right scapula. No projectile fragments are recovered. There is hemorrhage along the wound track.

DIRECTION:

The wound track passes from right to left, upward and slightly back to front.

GUNSHOT WOUND #12 – LATERAL RIGHT BACK NEAR AXILLA:

ENTRY WOUND:

The lateral right back shows an entry gunshot wound near the posterior axilla. The wound is $6\frac{1}{2}$ inches below the top of the shoulder and $1\frac{3}{4}$ inch posterior to the right lateral midline. The wound is $1\frac{1}{4} \times \frac{3}{4}$ inch and is elongated with a roughly 5 to 11 o'clock orientation. No soot or stippling is identified.

EXIT WOUND:

The right upper back shows a $\frac{5}{8}$ inch exit wound located 8 inches below the top of the head, 4 inches to the right of the posterior midline and about 1 inch below the top of the shoulder. The wound shows irregular marginal tears.

WOUND TRACK:

The wound track passes through the soft tissues of the right upper back. There are extensive fractures of the right scapula. No projectile fragments are recovered. There is hemorrhage along the wound track.

DIRECTION:

The wound track passes from right to left, upward and slightly back to front.

GUNSHOT WOUND #13 – LATERAL LEFT LOWER LEG:

ENTRY WOUND:

The lateral aspect of the left lower leg shows a $\frac{1}{2}$ inch round entry gunshot wound $16\frac{1}{2}$ inches above the heel and 2 inches lateral to the posterior midline of the lower leg. There are small irregular wounds

7

just below the entry wound that are consistent with shrapnel-type injuries. No soot or stippling is identified.

EXIT WOUND:

There is no exit wound.

WOUND TRACK:

The wound track passes through the soft tissues of the left lower leg and posterior knee. There is minimal hemorrhage along the wound track. A distorted, jacketed projectile and a separate small lead fragment are recovered from the left posterior knee. There is minimal hemorrhage around the projectile fragments. No injuries of major neurovascular structures are noted.

DIRECTION:

The wound track passes from left to right, slightly front to back and slightly upward.

GUNSHOT WOUND #14 – POSTERIOR LEFT LOWER LEG:

The posterior aspect of the left lower leg shows a $2 \times \frac{3}{8}$ inch graze wound centered about 12 $\frac{1}{2}$ inches above the left heel. The wound track has a 7 to 1 o'clock orientation. There are dried curved abrasions along the inferior and superior tips. The abrasion of the inferior wound tip is slightly wider and the direction of the graze wound is upward and slightly left to right. No soot or stippling is identified. No projectile fragments are recovered.

GUNSHOT WOUND #15 – ANTEROLATERAL LEFT THIGH:

ENTRY WOUND:

The anterolateral left thigh shows a $\frac{1}{2}$ inch round entry gunshot wound 27 inches above the left heel and 1 $\frac{3}{4}$ inch to the left of the anterior midline of the thigh. The wound shows a circumferential abrasion collar. No soot or stippling is identified.

EXIT WOUND:

The anteromedial aspect of the left thigh shows an exit wound 25 $\frac{3}{4}$ inch above the left heel and 4 inches medial to the anterior midline of the left thigh. The wound is $\frac{5}{8}$ inch with an abrasion collar that is wider along the superior medial margins.

RE-ENTRY WOUND:

The anteromedial aspect of the right thigh shows a re-entry wound 25 inches above the right heel and 5 $\frac{1}{2}$ inches medial to the anterior midline of the right thigh. The wound is $\frac{5}{8}$ inch and round with slight irregular margins. There is a marginal abrasion that measures up to $\frac{3}{8}$ inch from the 2 to 7 o'clock position.

WOUND TRACK:

The wound track passes through the soft tissues of the left anterior thigh and the right thigh. A distorted, jacketed, projectile is recovered from the soft tissues of the posterior right thigh. No fractures or injuries of major neurovascular structures are noted.

fx

DIRECTION: The wound track passes from left to right, slightly downward and slightly front to back.

GUNSHOT WOUND #16 – LEFT UPPER BACK:

ENTRY WOUND: The left upper back shows a $\frac{5}{8}$ x $\frac{1}{2}$ inch entry wound 9 $\frac{1}{2}$ inches below the top of the head and $\frac{3}{4}$ inch to the left of the posterior midline. No soot or stippling is identified.

EXIT WOUND: The left lateral upper back shows an exit wound 9 $\frac{1}{4}$ inch below the top of the head and 5 inches to the left of the posterior midline. The wound consists of a $\frac{3}{8}$ inch opening along the medial aspect and an elongated abrasion that is 1 $\frac{1}{8}$ inch along the lateral wound edge.

WOUND TRACK: The wound track undermines the skin of the left upper back. There are abrasions on the skin between the entry and exit wounds. The wound track does not penetrate the chest cavity and there are no injuries of major neurovascular structures. No projectile fragments are recovered.

DIRECTION: The wound track passes from right to left and without significant upward/downward or front/back deviation.

GUNSHOT WOUND #17 – RIGHT MID BACK:

ENTRY WOUND: The right mid back shows an entry wound 12 inches below the top of the head and 5 $\frac{1}{2}$ inches to the right of the posterior midline. The wound consists of a $\frac{1}{2}$ inch opening along the superior medial aspect with a $\frac{3}{4}$ inch elongated abrasion from 3 to 6 o'clock position. The skin is undermined at the 11 o'clock position. No soot or stippling is identified.

EXIT WOUND: The right mid to upper back shows an exit wound 10 inches below the top of the head and 3 $\frac{1}{4}$ inch to the right of the posterior midline. The wound is $\frac{7}{8}$ x $\frac{1}{2}$ inches and curved. There is a 1 $\frac{1}{2}$ inch abrasion inferior to the wound.

WOUND TRACK: The wound track passes through the soft tissues of the back. There is no penetration of the chest cavity. No projectile fragments are recovered.

DIRECTION: The wound track passes from right to left and upward.

GUNSHOT WOUND #18 – RIGHT MID BACK:

The right mid back shows a $1 \frac{3}{4} \times \frac{1}{2}$ inch graze wound centered 13 inches below the top of the head and $5 \frac{1}{4}$ inch to the right of the posterior midline. The wound has a 5 to 11 o'clock orientation. No soot or stippling is identified. The wound track passes upward and right to left. No projectile fragments are recovered.

GUNSHOT WOUND #19 – POSTERIOR RIGHT SHOULDER:

The right posterior shoulder shows a $1 \frac{1}{2} \times \frac{3}{4}$ inch graze wound located 2 inches below the top of the shoulder. There is a slightly curved abrasion on the inferior tip. No soot or stippling is identified. The wound track passes upward without significant right/left or front/back deviation. No projectile fragments are recovered.

GUNSHOT WOUND #20 – LATERAL LEFT BUTTOCK:

ENTRY WOUND: The left lateral lower buttock shows an entry wound 31 inches above the heel and 6 inches to the left of the posterior midline. The wound is $1 \frac{3}{4} \times \frac{5}{8}$ inch and has a 5 to 11 o'clock orientation. The inferior wound edge has a slight curved abrasion. No soot or stippling is identified.

EXIT WOUND: The left lateral upper buttock shows a $\frac{5}{8}$ inch exit wound 36 $\frac{1}{2}$ inches above the heel and 6 $\frac{3}{4}$ inch left of the posterior midline. There are small marginal tears.

WOUND TRACK: The wound track passes through the soft tissues of the left buttock. No projectile fragments are recovered.

DIRECTION: The wound track passes upward, slightly right to left and slightly back to front.

GUNSHOT WOUND #21 – RIGHT UPPER BUTTOCK:

ENTRY WOUND: The right upper buttock shows a $1 \frac{1}{2}$ inch entry wound 36 $\frac{1}{2}$ inches above the heel and 5 $\frac{1}{2}$ inches to the right of the posterior midline. The wound is elongated with a 5 to 11 o'clock orientation. There are irregular abrasions of the wound edges. No soot or stippling is identified. Fabric is noted to be imbedded in the wound.

EXIT WOUND: The right lower back shows a $\frac{1}{2}$ inch roughly round exit wound 4 $\frac{1}{4}$ inch to the right of the posterior midline and 38 $\frac{1}{2}$ inches above the heel. There are slight abrasions at the 3 and 10 o'clock wound margins.

WOUND TRACK: The wound track only passes through the soft tissues of the right upper buttock. No projectile fragments are recovered from the wound track.

DIRECTION:
slightly right to left and slightly back to front.

The wound track passes upward,

GUNSHOT WOUND #22 – RIGHT LATERAL BUTTOCK:

ENTRY WOUND: The right lateral buttock shows an entry wound 34 inches above the heel and 6 ½ inches right of the posterior midline. The wound is 1 ½ x 1 inch and elongated with a 7 to 1 o'clock orientation. There is an abrasion along the 3 to 6 o'clock margin. No soot or stippling is identified.

EXIT WOUND: The right upper lateral buttock shows a 1 ¾ inch elongated exit wound 37 inches above the heel and 6 ½ inches to the right of the posterior midline. The wound has a 5 to 11 o'clock orientation with irregular marginal abrasions.

WOUND TRACK: The wound track only passes through the soft tissues of the right lateral buttock. No projectile fragments are recovered from the wound track.

DIRECTION: The wound track passes from back to front, upward and without significant right/left deviation.

GUNSHOT WOUND #23 – LEFT ELBOW:

ENTRY WOUND: The lateral left elbow region shows a ¾ to ½ inch entry wound 10 ½ inches below the top of the shoulder and 2 ½ inches lateral to the olecranon process. The wound shows a thin abrasion collar and is present over the posterolateral aspect of the elbow area. No soot or stippling is identified.

EXIT WOUND: The medial left elbow region shows a 5/8 inch exit wound 11 inches below the top of the shoulder. There are slight irregular tears of the margins.

WOUND TRACK: The wound track passes through the left elbow region resulting in complete fracture of the left distal humerus. A small fragment of jacket material is recovered from the left medial elbow during the initial external examination of the body.

DIRECTION: The wound track passes from left to right, slightly front to back and slightly distal.

GUNSHOT WOUND #24 – LEFT UPPER ARM:

ENTRY WOUND: The posteromedial aspect of the left upper arm shows a 7/8 inch entry wound 9 ½ inches below the top of the shoulder.

There is a curved abrasion along the posterior and inferior wound edges. No soot or stippling is identified.

EXIT WOUND:

The anteromedial aspect of the left upper arm shows a $\frac{3}{4}$ inch exit wound 8 inches below the top of the shoulder. There are irregular marginal tears with no noted abrasions.

WOUND TRACK:

The wound track undermines the skin of the anterior left upper arm. There are a few abrasions on the skin between the entry and exit wounds. There are no injuries of major neurovascular structures and no associated fractures. No projectile fragments are recovered from the wound track.

DIRECTION:

The wound track passes back to front, slightly upward and without significant right/left deviation.

ADDITIONAL INJURIES:

- The left side of the forehead shows a $\frac{1}{4}$ inch full-thickness laceration with $\frac{1}{4}$ to $\frac{1}{2}$ inch abrasions along the wound margins. A $\frac{1}{2}$ inch curved superficial dried abrasion is noted on the scalp just superolateral to the laceration.
- The lateral aspect of the left distal thigh shows a $\frac{3}{8}$ inch abrasion.
- The lateral aspect of the left lower leg shows a $\frac{5}{8}$ inch abrasion.
- The left anterior abdomen shows a $\frac{3}{8}$ inch abrasion.
- The posterolateral aspect of the right index finger shows a $\frac{1}{4}$ inch abrasion.

INTERNAL EXAMINATION:**BODY CAVITIES:**

The muscles of the chest and abdominal wall are normal in color and consistency. The organs are in their correct anatomic positions. Significant injuries involving multiple organs, bony skeleton and left hemidiaphragm are described above. There is 250 ml of blood in the right chest cavity, 450 ml of blood in the left chest cavity and about 100 ml of blood within the peritoneal cavity.

NECK:

The hyoid bone, thyroid cartilage and cricoid cartilage are intact. No hemorrhage is identified in the strap muscles of the neck. The larynx is patent with no obstructive materials or masses. The laryngeal mucosa is smooth.

CARDIOVASCULAR SYSTEM:

The heart is 370 grams. The epicardial surface is smooth and the heart has a normal configuration. The coronary arteries have the usual takeoff and distribution. Sectioning of the coronary arteries reveals no evidence of atheromatous disease. The endocardium is smooth and the valves

are unremarkable. The myocardium is tan and homogeneous. No areas of scarring or other focal lesions are noted.

RESPIRATORY SYSTEM:

The right lung is 350 grams and the left lung is 280 grams. Injuries of the left lung are described above. The pleural surfaces are smooth. The lower trachea and major bronchi are patent. Both lungs are pink/red and soft. Hemorrhage is present along the wound tracks through the left lung. No mass lesions or areas of consolidation are identified.

HEPATOBIILIARY SYSTEM:

The liver is 1335 grams. Extensive injuries of the liver are described above. The parenchyma is red/brown with no underlying pathologic abnormalities. The gallbladder holds about 10 ml of liquid green bile and has a smooth mucosal lining. No gallstones are present.

HEMOLYMPHATIC SYSTEM:

The spleen is 120 grams. There are extensive lacerations of the spleen. The parenchyma is dark red and soft. No focal lesions are noted.

GASTROINTESTINAL SYSTEM:

The esophagus has a smooth mucosa lining. An injury of the stomach is described above. The stomach holds no food, liquid or pill fragments. The gastric lining shows no ulcerations or other focal lesions. The intestines are intact with no areas of ischemia or perforation. The appendix is not identified.

UROGENITAL SYSTEM:

The right kidney is 115 grams and the left kidney is 120 grams. The capsules strip easily to reveal smooth cortical surfaces. The renal parenchyma is red/tan with well-defined corticomedullary junctions. There is an injury of the left kidney, as described above. The bladder holds about 50 ml of clear yellow urine and has a smooth mucosal lining. The prostate gland is unremarkable.

ENDOCRINE SYSTEM:

The adrenals and thyroid gland are unremarkable. Injury of the pancreas is described above.

MUSCULOSKELETAL SYSTEM:

Fractures associated with the gunshot wounds are described above. No underlying bony abnormalities are noted. The sternum and ribs exhibit the expected bone density.

CENTRAL NERVOUS SYSTEM:

Reflection of the scalp reveals an injury of the left frontal scalp. The calvarium is intact. Removal of the calvarium reveals no epidural, subdural or subarachnoid hemorrhage. The leptomeninges are thin. The brain is 1520 grams. The cerebral and cerebellar hemispheres are symmetrical. The vessels at the base of the brain are thin-walled and have the usual distribution. No aneurysms or other abnormalities are noted. Sectioning of the cerebrum, cerebellum and brainstem reveals no areas of hemorrhage or softening. The base of the skull is intact.

tx

ADDITIONAL PROCEDURES:

1. Toxicologic specimens are collected and submitted for analysis. The specimens include blood from the aorta, urine, bile and vitreous.
2. An air-dried blood spot card is retained.
3. Multiple radiographs are obtained prior to the autopsy and reveal the projectile fragments that are subsequently recovered.
4. The following evidence is collected in conjunction with law enforcement and is retained in their custody:
 - handcuffs.
 - left wrist watch.
 - clothing.
 - small piece of detached heel from left shoe.
 - projectile fragment from bag near feet.
 - projectile fragments from left thigh.
 - projectile fragment from bag near right hip.
 - pack of cigarettes from shirt pocket.
 - projectile from left side between shirt and vest.
 - buccal swab.
 - projectile from bag near left shoulder.
 - purple top tube of blood.
 - projectile fragment from left medial elbow. (GSW #23)
 - projectile from posterior left knee. (GSW #13)
 - projectile from posterior right thigh. (GSW #10)
 - projectile from upper middle back. (GSW #8)
 - projectile from right lower back/upper pelvis. (GSW #7)
 - projectile from left lower back/upper pelvis. (GSW #6)
 - projectile from posterior lower neck. (GSW #3)
 - projectile from right lateral chest. (GSW #2)
 - projectile from left lateral chest. (GSW #4)
 - projectile from posterior spine at T12. (GSW #1)
 - fingerprints/palm prints.

MICROSCOPIC EXAMINATION:

HEART: (C)
abnormalities.

No specific pathologic

LUNGS: (B)
hemorrhage.

Atelectasis. Acute

LIVER: (A)
abnormalities.

No specific pathologic

AUTOPSY REPORT


MAY, Myron DeShawn
14M-462

KIDNEY: (A)
abnormalities.

No specific pathologic

BRAIN: (D)
abnormalities.

No specific pathologic



Lisa M. Flannagan, M.D.
Associate Medical Examiner

LMF/trp/lmf
Completed: December 15, 2014

- CONFIDENTIAL -

University of Florida Pathology Laboratories
Department of Pathology and Laboratory Medicine
4800 SW 35th Drive
Gainesville, FL 32608
Phone: 352-265-9900 Fax: 352-265-9904

Page: 1 of 1

LAB NUMBER: R14-02308
NAME: May, Myron
CASE NO: 14M-462
RECEIPT DATE: 11/25/2014

Forensic Toxicology Laboratory

SUBMITTER: Dr. Lisa Flannagan, District 2 Medical Examiners Office, 1899 Eider Court, Tallahassee, FL 32308.


SPECIMENS RECEIVED:

- A. Blood, aorta
- B. Urine
- C. Bile
- D. Vitreous Humor

	<u>Analyte</u>	<u>Qualitative Results</u>	<u>Quantitative Results</u>
VOLATILES			
A. Blood	None Detected		
B. Urine	None Detected		
COMPREHENSIVE DRUG SCREEN			
A. Blood	Amphetamine	Positive	0.24 mg/L
B. Urine	Amphetamine	Positive	

RESULT CERTIFICATION:

Results Certified by:


Bruce A. Goldberger, Ph.D., DABFT
Director of Toxicology & Professor

R1402308 - 01/ BG
PRINTED: 12/11/14

12/11/14 [0001]



Full b

Name— MAY,
MYRON D.

31 YRS B M 11/21/2014 14M-462

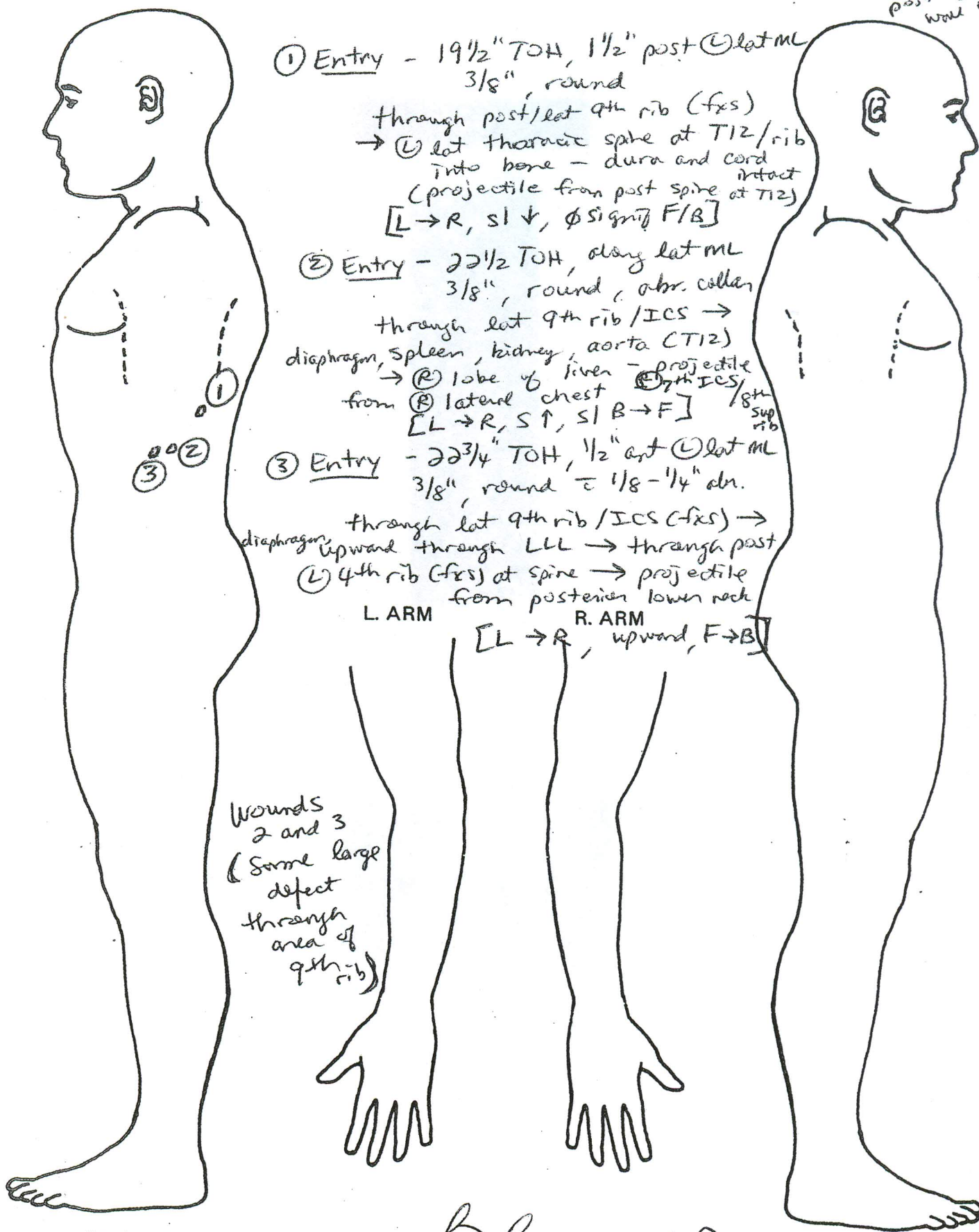
Age— LEON LMF

Autopsy No. _____

14m-462

Date / /

GSW ① grazed
post chest
wall entering



Cat. No. 44-1-005-00

Blannay MD

BODY DIAGRAM

Front

Back

⑤ Entry - 17 1/2" TOH

along inf/lat edge
of ① areola

1/2 x 1"

4 1/2" ① AML

3-6 o'clock
(transverse
abrasions
1/4 - 1/2")

Exit -

stellate

15 1/2" TOH

1" ① AML

1/2 x 3/4"

④ Entry - 19 1/2" TOH, 1" ① PML

1-7 o'clock, 1 1/4 x 3/8"

curved

through post ① ribs
7 and 8 (↑fxs)

upward and R → L

to fx lat

① 3rd rib

(not through)

projectile from

left lateral

chest

(caught in
adipose
tissue of
omentum
- through
① hemidiaph.
defect)

- loose
in ① chest

[R → L sl. B → F,
upward]

⑥ Entry - along inf gluteal
crease (2 wounds)

• lower one 30" above heel,
2 3/4" ① PML, 5/8"

3/8" abn 3-9 o'clock

• upper wound 31" above heel,
2 1/2" ① PML, 3/4" ①

marginal abrasions

Projectile from left lower
back/upper pelvis

⑦ Entry -

30 1/2" above
heel, 5" ① PML

3/4 x 1/2",
3/4" abn along sup
edge

1/4" abn 5-11 o'clock

Projectile from
right lower
back/upper
pelvis

Decedent's
Height

_____ inches

Name

Myron May

Examined

By

D. L. Narayana

Date

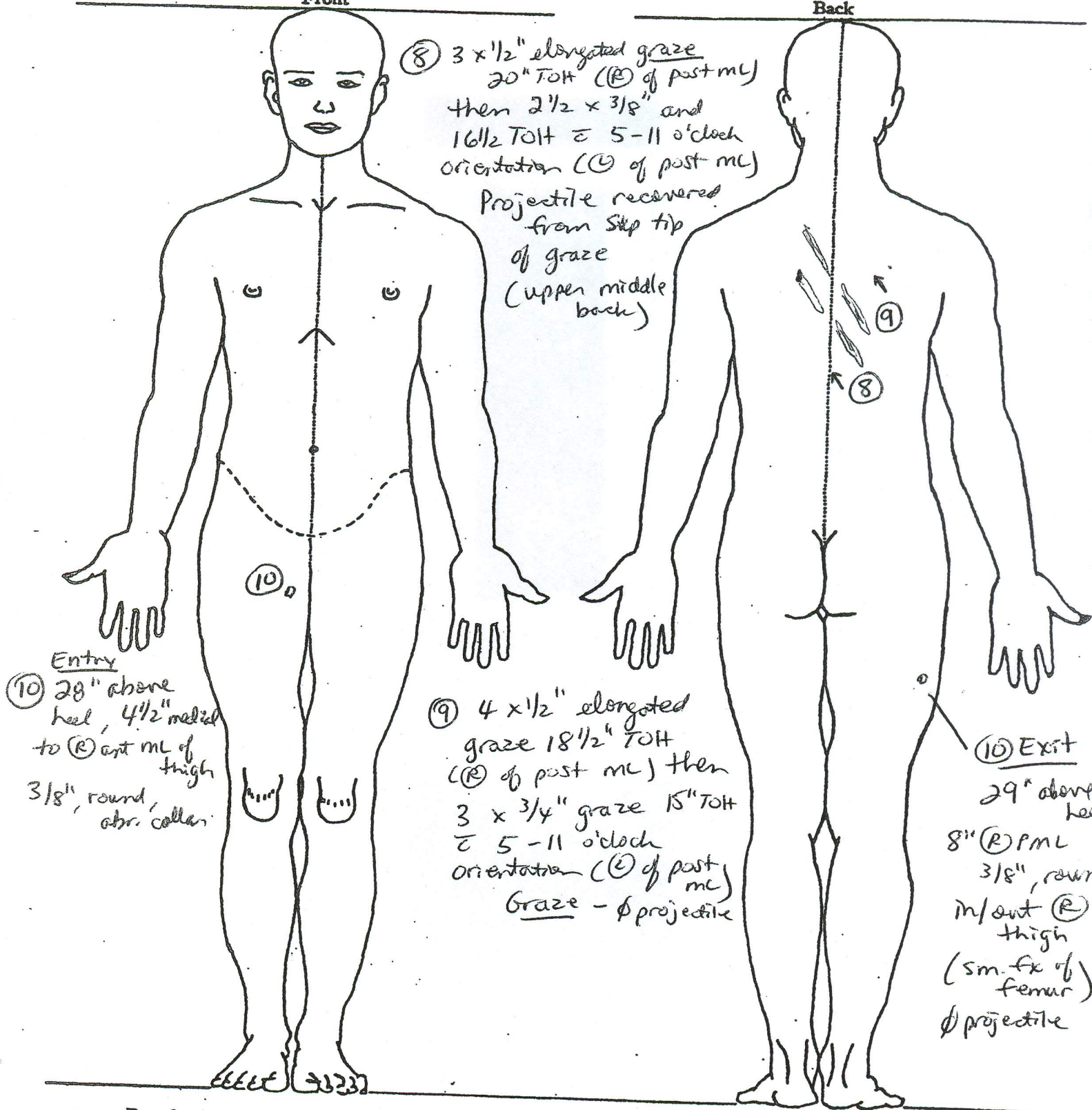
11/21/14

MAY,
MYRON D.
31 YRS B M 11/21/2014 14M-462
LEON LMF

BODY DIAGRAM

Front

Back



Decedent's Height _____ inches

Name Myron May
Examined By Blawie no Date 11/21/14



Full body, nr

Name _____ MAY, MYRON D.

31 YRS B M 11/21/2014 14M-462

Age _____ LEON LMF

Autopsy No. _____

14M-462

Date _____

/ /

⑪ Entry

6³/₄" from TOS
2³/₄" post to (R) lat ML
5⁷/₈ x 1¹/₂"
1¹/₄" chr. inf edge

* Both wound tracks

R → L, upward and

SI B → F to exit

(R) upper back

(↑ fix of scapula)

⑫ Entry

6¹/₂" from TOS
1³/₄" post to (R) lat ML
1¹/₄ x 3¹/₄"
elongated roughly 5-11 o'clock

L. ARM

R. ARM

3³/₈" chr.

⑬ entry

16¹/₂" above
heel,
2" lat post
ML
1¹/₂" round

Projectile
from
(1) post
knee
(min. hem)

Small
Shrapnel
injuries

5⁷/₈"
abrasion

Cat. No. 44-1-005-00

Blannagard

BODY DIAGRAM

Front

Back

⑪ Exit 1 3/4" (R) PML
9 1/4" TOH
3/4 x 3/8" irreg.
tears, ϕ abn.

⑫ Exit
8" TOH
4" (R) PML
5/8", irreg
tears, ϕ abn.

3/8" abn.

↑ fractures
of (R) scapula
spine

⑮ Re-entry

25" above heel
5 1/2" medial to
(R) ant ML thigh
5/8", round τ
irreg. edges;
mag. abn. up to
3/8" 2-7 o'clock

Projectile
from posterior
right thigh

⑮ Entry

27" above heel
1 3/4" (L) ant ML
of thigh
1/2", round τ
circ. abn.

Exit - 25 3/4" from heel,
4" (R) ant ML of thigh
5/8", abn. wider
sup/med.
(soft tissue
injury)

⑭ Graze
wound
2 x 3/8"
~1/2" above
heel
(post/lat
calf)

Decedent's
Height _____ inches

Name

Myron May

Examined

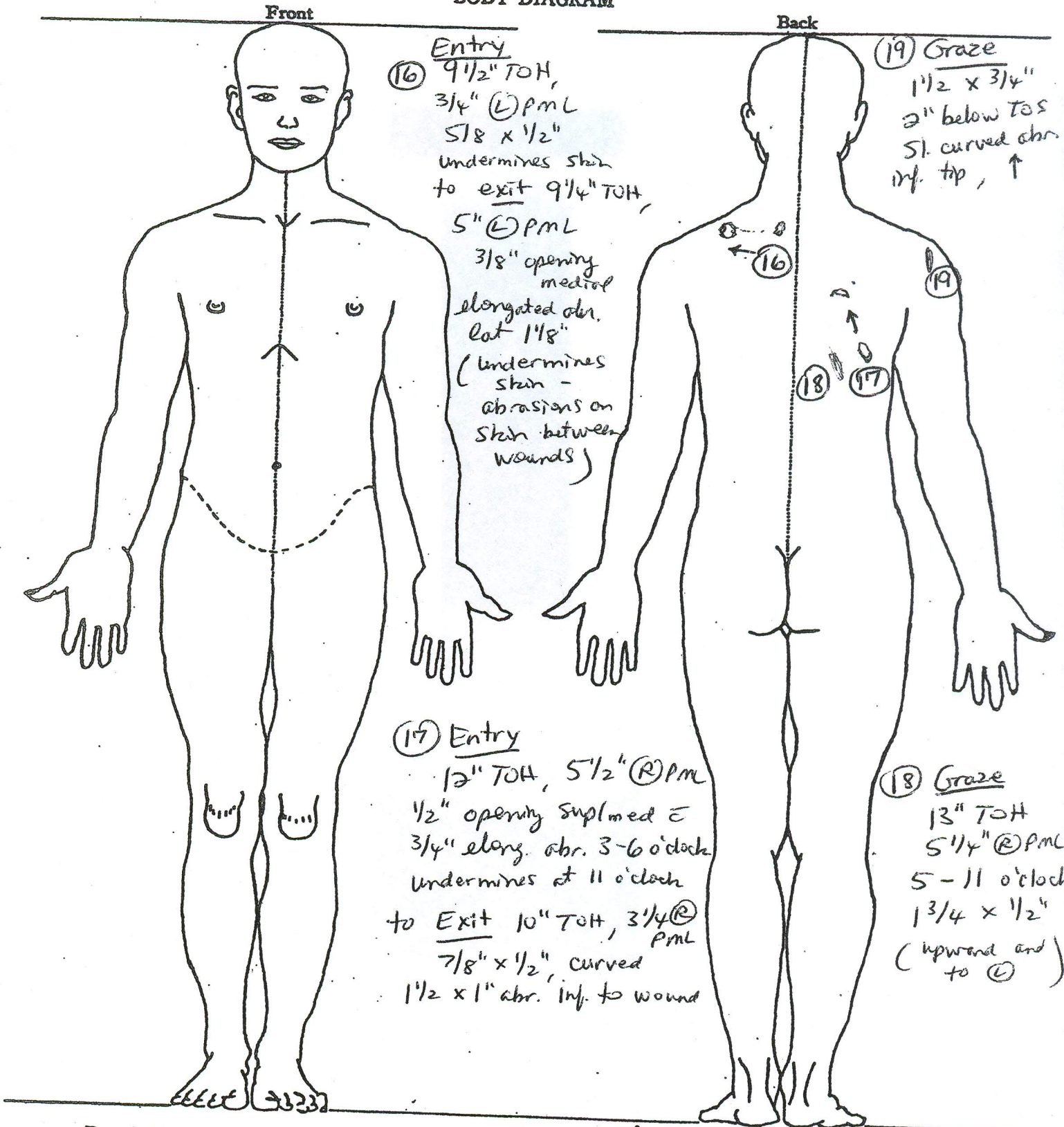
By

Blannay MD

Date

11/21/14

BODY DIAGRAM



Decedent's
Height _____ inches

Name Myron May
Examined By Blannym Date 11/21/14

MAY,
MYRON D.
31 YRS B M 11/21/2014 14M-462
LEON LMF

BODY DIAGRAM

Front

Back

(22) Entry 34" above heel
6 1/2" (R) PML
1 1/2 x 1", elongated
7-11 o'clock
abr. 3-6 o'clock
- undermines
skin to exit
37" above heel
6 1/2" (R) PML
1 3/4" elongated
5-11 o'clock
irreg. marginal
abrasions

(20) Entry
31" above heel
6" (C) PML
1 3/4" x 5/8"
5-11 o'clock
abr. inf. edge sl. curved
- Undermines skin to
exit 36 1/2" above heel,
6 3/4" (L) PML
~5/8", irreg. marginal tears

(21) Entry
36 1/2" above heel
5 1/2" (R) PML
Embedded fabric
1 1/2", elongated
5-11 o'clock
irreg. abrasions
on edges
- Undermines skin
to exit 38 1/2" above
heel
4 1/4" (R) PML
1 1/2", roughly round
sl. abr. at
3 and 10
o'clock

Decedent's
Height _____ inches

Name

Myron May

Examined

By

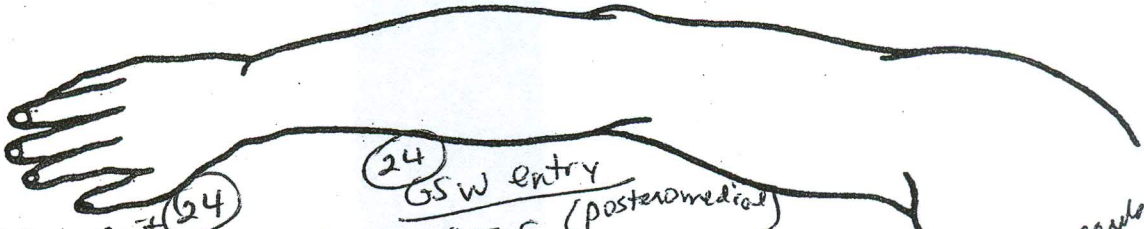
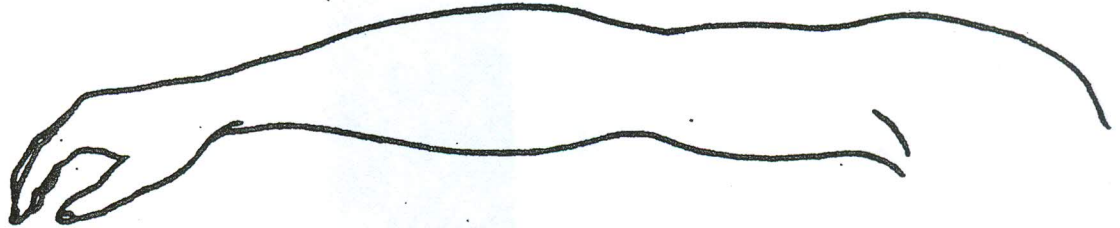
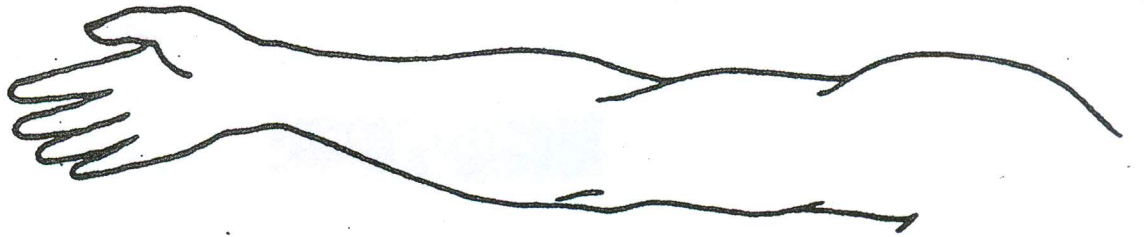
Blannys MD

Date

11/21/14

BODY DIAGRAM—ARM

RIGHT



GSW exit (24)

8" TOS (anteromedial)
3/4" irreg. tears
of chr. collar

(24)

GSW entry

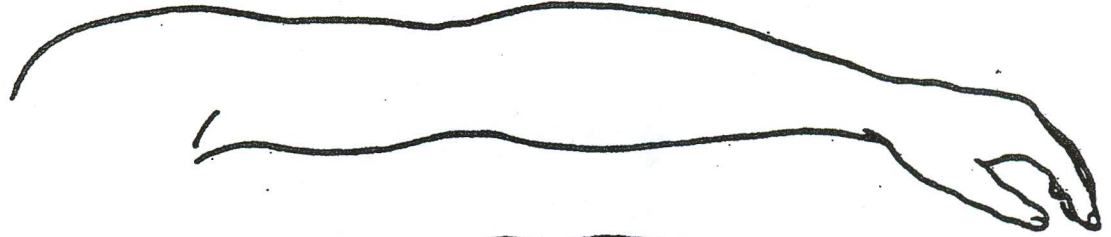
9 1/2" TOS (posteromedial)

7/8" curved chr.
post/inf.

GSW exit (23)

11" TOS, 5/8" sl. irregular
edges

LEFT



(23)

GSW entry

2 1/2" lat to olecranon process

10 1/2" TOS

~3/8-1/2" round to
thin chr. collar
post/lat elbow area

Decedent's Name

Myron May

Examined

By

Blancas

Date

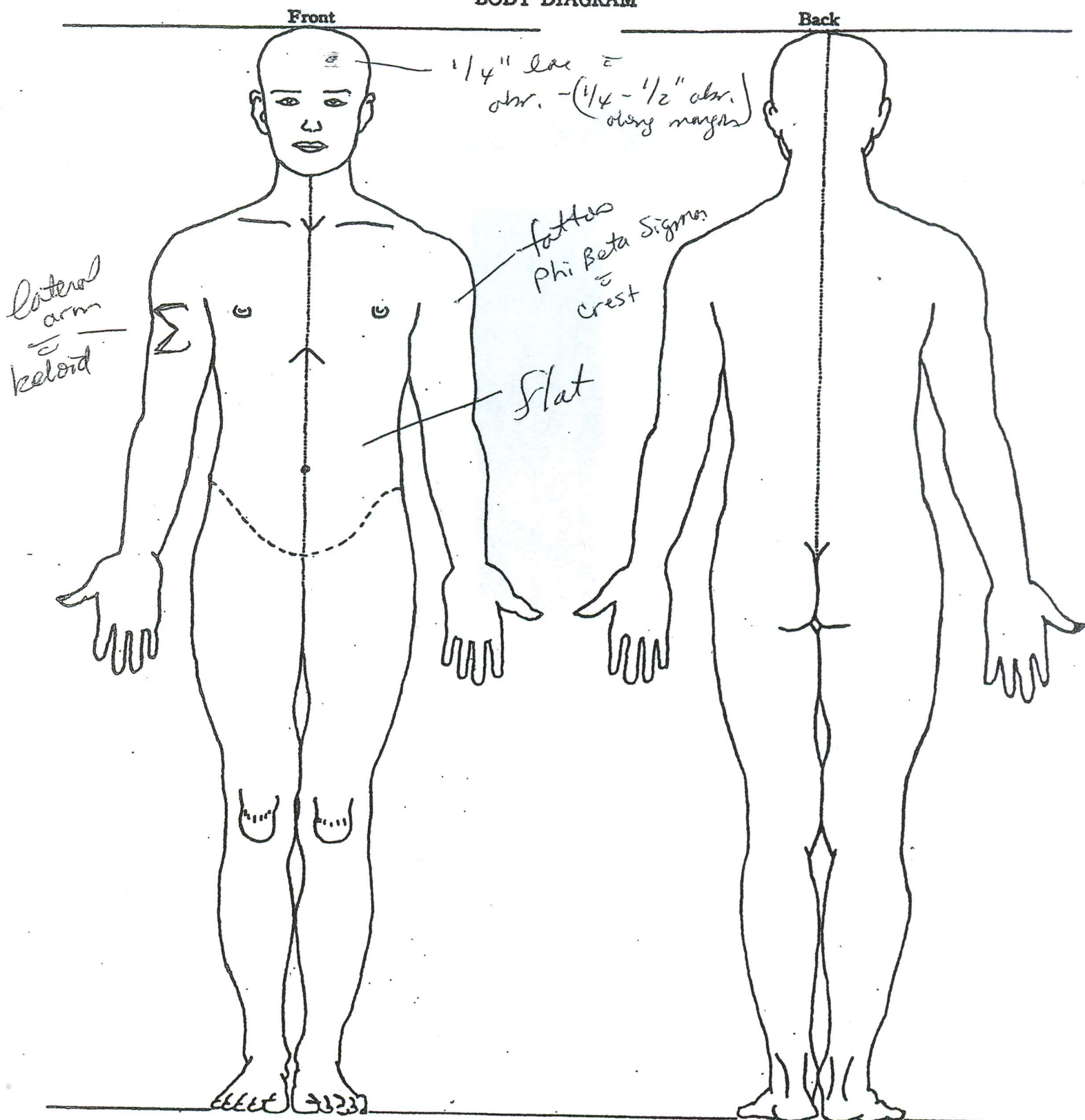
11/21/14

(L → R sl. distal
sl. inf.)

OVERALL

MAY,
MYRON D.
31 YRS B M 11/21/2014 14M-462
LEON LMF

BODY DIAGRAM



Decedent's
Height _____ inches

Name Myron May
Examined By L. Blaney MD Date 11/21/14